

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 2
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) House Freedom Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00552851 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee House Freedom Fund			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 04 / 10 / 2018</div> </div>	
Mailing Address PO BOX 1948			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">146.85</div>	
City Alexandria	State VA	Zip Code 22313	Transaction ID : E0773F1B00A7F47D38A1 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 04 / 10 / 2018</div> </div>	
Purpose of Expenditure IE-Fulcher-Donation Processing		Category/ Type	Name of Federal Candidate Fulcher, Russ, , ,	
Name of Federal Candidate Fulcher, Russ, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ID	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee House Freedom Fund			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 04 / 17 / 2018</div> </div>	
Mailing Address PO BOX 1948			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">7.25</div>	
City Alexandria	State VA	Zip Code 22313	Transaction ID : E2E4EC0CBE7734AFCBF: Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 04 / 17 / 2018</div> </div>	
Purpose of Expenditure IE-Fulcher-Donation Processing		Category/ Type	Name of Federal Candidate Fulcher, Russ, , ,	
Name of Federal Candidate Fulcher, Russ, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ID	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">154.10</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Brown, Megan, , ,

[Electronically Filed]

Date

MM / DD / YYYY
04 / 26 / 2018

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) House Freedom Fund	FEC IDENTIFICATION NUMBER ▼ C C00552851
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee House Freedom Fund			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 24 / 2018	
Mailing Address PO BOX 1948			Amount 68.90	
City Alexandria	State VA	Zip Code 22313	Transaction ID : E48B830CB99E5410CA89	
Purpose of Expenditure IE-Fulcher-Donation Processing		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 04 / 24 / 2018	
Name of Federal Candidate Fulcher, Russ, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ID	
Calendar Year-To-Date Per Election for Office Sought		9550.06	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee House Freedom Fund			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 26 / 2018	
Mailing Address PO BOX 1948			Amount 877.30	
City Alexandria	State VA	Zip Code 22313	Transaction ID : EA1705AAEE4F24CD7A71	
Purpose of Expenditure IE-Fulcher-Donation Processing		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 04 / 26 / 2018	
Name of Federal Candidate Fulcher, Russ, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: ID	
Calendar Year-To-Date Per Election for Office Sought		10427.36	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	946.20
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	1100.30

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Brown, Megan, , ,

[Electronically Filed]

Date

MM / DD / YYYY
04 / 26 / 2018

Signature